HCFA-PM-87-4 (BERC)

March 1987

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OMB NO.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

A.	Target Group:	The	Chronically	and/or	severely	mentally	ill	age	21	years	and
	older.										

В.	Area	s of State in which services will be provided: Entire State.
		Only in the following geographic areas (authority of section $1915(g)(1)$ of the Act is invoked to provide services less than Statewide:
С.	Comp	arability of Services Services are provided in accordance with section 1902(a)(10)(B) of the Act.
	X	Services are not comparable in amount, duration, and scope. Authority of section $1915(g)(1)$ of the Act is invoked to provide services

D. Definition of Services: Case management services are those provided to assist a client in gaining access to needed medical, social, educational, and other services essential to meeting basic human needs. This includes assisting the client in gaining access to basic community resources, referral and linkage to services, and is not restrictive in nature.

without regard to the requirements of section 1902(a)(10)(B) of the Act.

Provider Specialties

<u>Private Facilities</u> - Private facilities are those facilities who contract directly with the Oklahoma Health Care Authority to provide case management services.

<u>DMHSAS</u> Contracted Facilities - DMHSAS contracted facilities are those facilities who contract with the DMHSAS to provide services. These facilities receive an appropriation from the DMHSAS and report to DMHSAS via the OMHIS system.

<u>Public Facilities</u> - Public facilities are the regionally based Community Mental Health Centers.

Service Case Management Unit 30 minutes <u>Limitation</u>
All units require prior authorization

All services will be subject to the medical necessity criteria.

Revised 02-01-97

Approval Date 4/22/97 Effective Date 2/1/97

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State OKLAHOMA

E. Provider Qualifications: Case managers certified on and after October 1, 1993, must have an associate's degree in a related human service field, or two years of college, plus two years or more of human service experience, including one year experience with children/youth and family; or a bachelor's degree in a related human service field plus one or more years human service experience; or a master's degree in a related human service field. All targeted case managers must complete training in targeted case management and received certification of such training.

Providers must work with an agency in which community based, facility and institutional linkages affecting the target group exist. The agency must demonstrate that their staff has experience working with the target group. The agency must comply with governing and program management standards set by the State of Oklahoma Department of Mental Health and Substance Abuse Services (DMHSAS), the certification agency. Acute care hospitals certified by the State Survey Agency as meeting Medicare standards including a JCAHO or American Osteopathic Association certification need not seek certification from the DMHSAS. Psychiatric hospitals certified by the State Survey Agency as meeting Medicare psychiatric hospitals standards including JCAHO accreditation need not seek certification from the DMHSAS. The agency must have the capacity to perform these case management functions. The agency must demonstrate its capacity to deliver case management services in terms of the following items:

- 1. Adequate case management staff to serve the target group.
- 2. Adequate administrative capacity to fulfill State and Federal requirements.
- 3. Maintenance of programmatic and financial records. Program records should show that the agency is able to develop and maintain assessment records. The financial records should include development of a management system which tracks costs associated with worker activities.

The agency must agree to comply with applicable Federal and State regulations.

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HCFA 179

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March 1987

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OMB NO.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

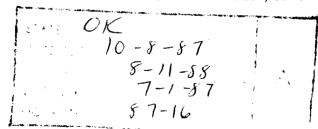
Case Management Services

- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan shall not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

New 07-01-87

TN# 87-16 Supercedes TN#7668 Approval Date 8-11-88 Effective Date 7-1-87

HCFA ID: 1040P/0016P



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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

Ā.	Target	Group:	Developmentally	disabled	children	0-3	years	of	age.

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н	Aread	\circ	State	าก	wnich	services	MTTT	שע	provided:

 $\overline{\mathbf{X}}$ Entire State

> Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than statewide:

C. Comparability of Services

in accordance with section Services are provided 1902(a)(10)(B) of the Act.

X Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

Definition of Services: Case Management refers to services provided to assist a client in gaining access to needed medical, social, educational, and other services essential to meeting basic human needs. Case management will include: 1) referral to needed services; 2) arranging for service delivery to ensure access to needed services; and, 3) monitoring of client's activities to ensure access and delivery of needed services.

A unit of case management is defined as each completed 10 minute increment that meets the above description of case management, with or on behalf of the individual, his or her parent(s) or legal quardian, for the benefit of the Medicaid eligible child.

Revised 04-26-99

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Approval Date 9-16-99 Effective Date 1-16-99

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Revision: HCFA-PM-87-4 (BERC)

March 1987

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

E. Qualification of Case Management Providers:

Provider Certification:

Case management providers must be certified by the State Department of Education in keeping with certification standards referenced in State Law, Title 70, Section 3-104, Part 9, as designated by the Medicaid agency. Case managers must work with early intervention and must meet the following criteria.

Case Manager Qualifications:

- 1. Capacity to provide all the core elements of case management services including:
 - a. Referral, coordination and linkage to services
 - Monitoring and follow-up of service provision
 - Capacity for case record documentation
- Knowledge of community-based, facility and institutional resources available to the target group and the experience to link to said resources.
- Experience in working in education, health or human service field.
- 4. Administrative experience to meet state and federal requirements as well as requirements set out by the certifying agency.
- Ability to maintain programmatic and financial records required by the certifying agency including the capacity to document case records consistent with program standards and state and federal requirements.
- 6. Graduation from an accredited college or university with a bachelor's degree in education, social work, health-related services or other closely related field and one year of experience in one or more of these fields.
- Receipt of approved State Department of Education Training.

TN# 95-16 Approval Date 5/8/96 Effective Date 7/6/90 Supersedes
TN#SUPERSEDES; NONE - NEW PAGE

Corrected

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

- F. The State assures that the provision of targeted case management services will not restrict an individual's free choice of certified providers in violation of section 1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the certified providers of targeted case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.

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New 7-6-90

Approval Date 5/8/96 Effective Date 7/6/90

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

1902(a)(10)(B) of the Act.

CASE MANAGEMENT SERVICES

Α.	Targe	t Group: High Risk Pregnant Women.
В.	Areas	of State in which services will be provided:
	X	Entire State.
		Only in the following geographic areas (authority of section $1915(g)(1)$ of the Act is invoked to provide services less than Statewide:
C.	Compa	rability of Services
		Services are provided in accordance with section $1902(a)(10)(B)$ of the Act.
	x	Services are not comparable in amount, duration, and scope. Authority of section $1915(g)(1)$ of the Act is invoked to

D. Definition of Services: Case Management is a set of interrelated activities under which responsibility for locating coordinating and monitoring appropriate services for an individual rests with a specific person in a case management agency. The purpose of case management services for high risk pregnant women is to assist those eligible for Medicaid in gaining access to needed medical, social, educational and other services, to reduce low birthweight infants and infant mortality or morbidity; to encourage the use of cost effective medical care by referrals to appropriate providers; and to discourage overutilization or duplication of costly services. Case management services will provide necessary coordination with local providers of non-medical services, such as mental health, health and nutritional education programs, when services provided by these entities are needed. The case manager will coordinate these non-medical services with needed medical services.

provide services without regard to the requirements of section

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State OKLAHOMA

CASE MANAGEMENT SERVICES

Service

Unit

Limitation

Case Management

One Service Per Day During Pre and Postnatal Period. * 7 Per Pregnancy

- * Services beyond these limitations may be provided when determined to be medically necessary for those recipients who are eligible for EPSDT. Services beyond limitations require prior approval.
- E. Qualifications of Providers

Individuals providing case management services must have a degree in a related field and at least one year of experience in community health case management or perinatal care. In the case of Registered Nurses with an associate degree, the case managers must have two years of experience in community health case management or perinatal care.

- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of \$1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan shall not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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March 1987

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

A. Target Group: Persons under age 21 who are in imminent risk of out-of-home placement for psychiatric or substance abuse reasons or are in out-of-home placement due to psychiatric or substance abuse reasons.

B. Areas of State in which services will be provide	В.	Areas of	State i	in which	services	will	be	provide	d:
-----------------------------------------------------	----	----------	---------	----------	----------	------	----	---------	----

	X	Entire State.
		Only in the following geographic areas (authority of section $1915(g)(1)$ of the Act is invoked to provide services less than Statewide:
c.	Comp	arability of Services
		Services are provided in accordance with section $1902(a)(10)(B)$ of the Act.
	ভৌ	Services are not comparable in amount, duration, and scope. Authority

of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services: Case Management services are those provided to assist a client in gaining access to needed medical, social, educational, and other services essential to meeting basic human needs. This includes assisting the client in gaining access to basic community resources, referral and linkage to services, and is not restrictive in nature.

Provider Specialties

Private Facilities - Private facilities are those facilities who contract directly with the Oklahoma Health Care Authority to provide case management services.

DMHSAS Contracted Facilities - DMHSAS contracted facilities are those facilities who contract with the DMHSAS to provide services. These facilities receive an appropriation from the DMHSAS and report to DMHSAS via the OMHIS

Public Facilities - Public facilities are the regionally based Community Mental Health Centers.

Service Case Management

Unit 30 minutes

Limitation All units require prior authorization

All services will be subject to the medical necessity criteria.

Approval Date Effective Date

Revised 02-01-97

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March 1987

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OMB NO.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

CASE MANAGEMENT SERVICES

E. Provider Qualifications: Case managers certified on and after October 1, 1993, must have an associate's degree in a related human service field, or two years of college, plus two years or more of human service experience, including one year experience with children/youth and family; or a bachelor's degree in a related human service field plus one or more years human service experience; or a master's degree in a related human service field. All targeted case managers for persons under age 21 must be supervised by a qualified mental health professional. All targeted case managers must complete training in targeted case management and received certification of such training.

Providers must work with an agency in which community based, facility and institutional linkages affecting the target group exist. The agency must demonstrate that their staff has experience working with the target group. The agency must comply with governing and program management standards set by the State of Oklahoma Department of Mental Health and Substance Abuse Services (DMHSAS), the certification agency. Acute care hospitals certified by the State Survey Agency as meeting Medicare standards including a JCAHO or American Osteopathic Association certification need not seek certification from the DMHSAS. Psychiatric hospitals certified by the State Survey Agency as meeting Medicare psychiatric hospitals standards including JCAHO accreditation need not seek certification from the DMHSAS. The agency must have the capacity to perform these case management functions. The agency must demonstrate its capacity to deliver case management services in terms of the following items:

- 1. Adequate case management staff to serve the target group on a 24 hour basis.
- Adequate administrative capacity to fulfill State and Federal requirements.
- 3. Maintenance of programmatic and financial records. Program records should show that the agency is able to develop and maintain assessment records. The financial records should include development of a management system which tracks costs associated with worker activities.

The agency must agree to comply with applicable Federal and State regulations.

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Approval Date 4/22 Approval Date 5/A/E Classification Approval Date 5/A/E Classification Approval Date 6/22-97
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